

Contractor Company: \_\_\_\_\_

# NIST & NTIA ACCESS REQUEST FORM

NAME: \_\_\_\_\_ NIST/NTIA MAIL CODE: \_\_\_\_\_

SSN: \_\_\_\_\_ ROOM/PHONE: \_\_\_\_\_

ACTION (Check One): ☐ ADD ☐ REPLACETYPE (Check One): ☐ FEDERAL EMPLOYEE ☐ CONTRACTOR ☐ GUEST RESEARCHERCITIZENSHIP (Check One): ☐ UNITED STATES ☐ FOREIGN NATIONAL)DUTY HOURS (Check One): ☐ BUSINESS HOURS (6:00 am to 6:00 pm) ☐ 24 HOUR ACCESS  
(If both Foreign National and 24 Hour Access is Checked, Complete Back of Form)

PERIOD OF VISIT: From \_\_\_\_\_ to \_\_\_\_\_

USER GROUPS:

☐ **BLDG. 1** (All exterior doors to Bldg. 1) ☐ **BLDG. 22** (All exterior doors to Bldg. 22)  
☐ **BLDG. 2** (All exterior doors to Bldg. 2) ☐ **BLDG. 24** (All exterior doors to Bldg. 24)  
☐ **BLDG. 4** (All exterior doors to Bldg. 4) ☐ **BLDG. 25** (All exterior doors to Bldg. 25)  
☐ **BLDG. 5** (All exterior doors to Bldg. 5) ☐ **BLDG. 26** (All exterior doors to Bldg. 26)  
☐ **NOAAEXT** (After Hours Access to all exterior doors of the David Skaggs Bldg)\*

Interior Rooms to be Accessed: \_\_\_\_\_

**\* JUSTIFICATION FOR AFTER HOURS ACCESS TO THE DAVID SKAGGS BLDG:**

AUTHORIZING OFFICIAL:

Name/Title:	Signature:	Date:
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MRSO SECURITY APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

(For Non-Federal Employees &amp; David Skaggs Bldg. Only) Wendy Monroe, MRS, x5198, Rm. 1-4508

**EMERGENCY CONTACT:**

NAME:	DAYTIME PHONE NUMBER:
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SIGNATURE: \_\_\_\_\_

This signature certifies that the above named Federal employee/Affiliate has received his/her PIN number/ID to access the exterior doors and if needed, access controlled, interior rooms at 325 Broadway, Boulder, Colorado. Federal employee/Affiliate agrees to keep his/her PIN number/ID confidential.